U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9

OMB No. 1660-0008 Expiration Date: July 31, 2015

| important: R | ead the instructions on pag | es 1–9. | Expiration Date: July 51, 2015 | | |
|--|--|---|---|--|--|
| | | | OR INSURANCE COMPANY USE | | |
| A1. Building Owner's Name | | Po | olicy Number: | | |
| Building Street Address (including Apt., Unit, Suite, and/or 1114 WARDEN STREET 1114 Warder | |). Co | ompany NAIC Number: | | |
| City BENBROOK | State TX ZIP Code 76 | 3126 | | | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel LOT 35 AND A PORTION LOT 34, TRACT 5, BLOCK 22, BENE | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 32.40'18.44"N Long. 97.27'34.31"W Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1A A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A c) Total net area of flood openings? Yes No d) Engineered flood openings? Yes No | | | | | |
| SECTION B - FLOOD | INSURANCE RATE MAP (FIRM | /I) INFORMATION | | | |
| B1. NFIP Community Name & Community Number BENBROOK, CITY OF 480586 | B2. County Name TARRANT | | 3. State EXAS | | |
| B4. Map/Panel Number B5. Suffix B6. FIRM Index I 9-25-2009 | Date B7. FIRM Panel Effective/Revised Date 9-25-2009 | B8. Flood Zone(s) AE | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 681.4 | | |
| ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source: B11, Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: B12 Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date: ☐ OPA | | | | | |
| SECTION C - BUILDING | ELEVATION INFORMATION (S | URVEY REQUIRE | D) | | |
| C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction A new Elevation Certificate will be required when construction of the building is complete. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: CITY OF BENBROOK #2 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the BFE. | | | | | |
| | | | e measurement used. | | |
| a) Top of bottom floor (including basement, crawlspace, or eb) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zond) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stair | N/A. es only) N/A. 682.2 building N/A. 681.4 682.0 | 29 \\ \tau \\ | feet | | |
| SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION | | | | | |
| This certification is to be signed and sealed by a land surveyor, information. I certify that the information on this Certificate repre I understand that any false statement may be punishable by fine Check here if comments are provided on back of form. Check here if attachments. Certifier's Name SUSAN L. STEWART PRESIDENT Company Name | sents my best efforts to interpret the | data available. le, Section 1001. ion A provided by a les ⊠ No | PLACE SEAL HERE SUSAN L. STEWART | | |
| Address 115 ST. LOUIS AVENUE City FORT WORTH State TX ZIP Code 76104 | | | | | |
| Signature Date 1/25/2016 | Telephone 817-33 | | - Who surve | | |

| ELEVATION CERTIFICATE, pa | age 2 | | | |
|---|---|---|--|---|
| IMPORTANT: In these spaces, o | copy the corresponding informatio | n from Section A | . FOF | R INSURANCE COMPANY USE |
| Building Street Address (including Apt 1114 WARDENT STREET | , Unit, Suite, and/or Bldg. No.) or P.O. Ro | oute and Box No. | Poli | cy Number; |
| City BENBROOK | State 1 | X ZIP Code 7 | 6126 Com | pany NAIC Number: |
| SECTION | D - SURVEYOR, ENGINEER, OR | ARCHITECT CER | TIFICATION (CONT | INUED) |
| Copy both sides of this Elevation Certi | ificate for (1) community official, (2) insura | ance agent/company | , and (3) building owner | ſ. |
| Comments | | | | |
| Janual Stewart | -6 | | | |
| Signature | | Date 1/25/2016 | | |
| SECTION E - BUILDING ELE | VATION INFORMATION (SURVEY | NOT REQUIRED) | FOR ZONE AO AN | D ZONE A (WITHOUT BFE) |
| and C. For Items E1–E4, use natural (E1. Provide elevation information for grade (HAG) and the lowest adjaa) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6–9 with (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth ordinance? ☐ Yes ☐ No ☐ | basement, crawlspace, or enclosure) is basement, crawlspace, or enclosure) is permanent flood openings provided in Se of the building is feet meters [d/or equipment servicing the building is number is available, is the top of the botto Unknown. The local official must certify | ent used. In Puerto R boxes to show wheth ction A Items 8 and/ meters ab above or belo feet om floor elevated in this information in S | ico only, enter meters. her the elevation is abouter the elevation is abouter the elevation is abouter the elevation is about feet her meters her abouter the elevation is about the eleva | ve or below the highest adjacent ove or ☐ below the HAG. ove or ☐ below the LAG. Instructions), the next higher floor AG. or ☐ below the HAG. mmunity's floodplain management |
| SECTION | F - PROPERTY OWNER (OR OWN | IER'S REPRESE | NTATIVE) CERTIFIC | ATION |
| | zed representative who completes Sectio ments in Sections A, B, and E are correct | | | issued or community-issued BFE) |
| rty Owner's or Owner's Authorize | ed Representative's Name | | | |
| Address | C | ity | State | ZIP Code |
| Signature | D | ate | Telephone | |
| Comments | | | | |
| | | | | |
| - | | | | Check here if attachments |
| The least off-interior the involve of the | SECTION G - COMMUNITY I | | | |
| of this Elevation Certificate. Complete the | or ordinance to administer the community applicable item(s) and sign below. Check | 's floodplain manage the measurement us | ment ordinance can con ed in Items G8–G10. In | nplete Sections A, B, C (or E), and G Puerto Rico only, enter meters. |
| is authorized by law to certify of G2. A community official complete | was taken from other documentation that I elevation information. (Indicate the source d Section E for a building located in Zone ns G4–G10) is provided for community flo | e and date of the ele A (without a FEMA- | vation data in the Comi issued or community-is | ments area below.) |
| G4. Permit Number | G5. Date Permit Issued | | Certificate Of Compliar | nce/Occupancy Issued |
| | | | | |
| G7. This permit has been issued for: | | ntial Improvement | | |
| G8. Elevation of as-built lowest floor (inG9. BFE or (in Zone AO) depth of flood | | feet | | um |
| G10. Community's design flood elevation | - | feet feet | _ | um um |
| Local Official's Name | 7 | Title | | |
| Community Name | | Telephone | | |
| S ure | Date | | | |
| Comments | | | | 8 |
| | | | | Check here if attachments. |

ELEVATION CERTIFICATE, page 3

Building Photographs See Instructions for Item A6.

| IMPORTANT: In these spaces, copy the corresponding information from Secti | on A. FOR INSURANCE COMPANY USE | | | | |
|--|---------------------------------|--|--|--|--|
| P···iding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box N WARDEN STREET | | | | | |
| City BENBROOK State TX ZIP Co | ode 76126 Company NAIC Number: | | | | |
| If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page. | | | | | |
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